APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

JUN921 12:54PM

(1 22/02 1 11111 511 11 2)		
NOTE: This form must be on file with the qualifying officer before opening the campaign account.		OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	/	
Initial Filing of Form Re-filing to Change: 🔲 T	reasurer/Deputy 🗹 Depository 🗌	Office Party
2. Name of Candidate (in this order: First, Middle, Last)	Address (include post office box or street code)	eet, city, state, zip
Mayra Jimenez	6241 E 4m	10.00
4. Telephone 5. E-mail address		The
Mayra Jimenez 4. Telephone 5. E-mail address Mayra jamenez (9620) 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if		
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if		
City Council Newber applicable: [] My intent is to run as a Write-In candidate.		
8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a		
Write-In No Party Affiliation	Party	/ candidate.
9. I have appointed the following person to act as my V Campaign Treasurer Deputy Treasurer		
10. Name of Treasurer or Deputy Treasurer		
Evelyn Jimenez		
11. Mailing Address 12. Telephone		
6241 E 4th Ave (305) 490-9144		
13. City 14. County 15. State 16. Zip Code 17. E-mail address Hialaan Wiami-Dade FU 33013 evimen a fiv. edu		
18. I have designated the following bank as my Primary Depository Secondary Depository		
19. Name of Bank 20. Address		
First Bank 1325 W 49th St		
21. City 22. County	·	24. Zip Code
First Bank 21. City 22. County Hialean Miami-Dag	Je t	33012
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.		
25. Date 26. Signature of Candidate		
06/09/2021 X Moayn (B)		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)		
I,, do hereby accept the appointment		
(Please Print or Type Name)		
designated above as: Campaign Treasurer Deputy Treasurer.		
06/09/2021 X CODD		
Date Signature of Campaign Treasurer or Deputy Treasurer		